CHILD Abuse

A Handbook for Manitoba Teachers

TEACHERS' PROTOCOL

Manitoba Community Services

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CHILD ABUSE

A Handbook for Manitoba Teachers

Prepared by:
The Manitoba Teachers' Society

In co-operation with:

The Manitoba Association of School Trustees
The Manitoba Association of School Superintendents
Manitoba Education
Manitoba Community Services

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FOREWORD

In early 1979 increased societal and teacher concern over child abuse prompted the Manitoba Teachers' Society, through its Ideals and Practice Committee, to develop guidelines for teachers to follow in cases of suspected child abuse among school-age children. Revisions to The Child Welfare Act in September 1979, which obligated any person to report immediately any abuse or suspected abuse of a child, made the development of a more comprehensive resource book on child abuse essential.

In 1981, the Manitoba Teachers' Society, in cooperation with the Manitoba Association of School Trustees, the Manitoba Association of School Superintendents, Manitoba Education and Manitoba Community Services, published **Child Abuse,** a widely distributed resource for educators.

Since then, revisions by the Province of Manitoba to the Guidelines for Reporting Child Abuse (November, 1987), revisions by Manitoba Community Services to the Child Welfare Act (now the Child and Family Services Act — April 1986), changes in the structure of Child Care Agencies in Winnipeg (now Child & Family Services Agencies) and in federal legislation governing sexual offences against children and youth have necessitated revision of the Teachers' Protocol.

Teachers' Protocol on Child Abuse: A Handbook for Manitoba Teachers is intended to aid teachers to recognize signs of child abuse and to understand their professional and legal obligations to abused children. It will assist teachers to discharge their responsibilities more effectively and to have greater understanding of the roles and responsibilities of other professionals beyond the school system. Cooperation, collaboration, and meaningful communication between the school and other agencies is essential. A multi-disciplinary approach, effectively managed, will result in more comprehensive services for abused children.

Like its 1981 predecessor, these revised protocols have been developed in cooperation with the Manitoba Association of School Trustees, the Manitoba Association of School Superintendents, Manitoba Education and Manitoba Community Services. The Manitoba Teachers' Society is grateful for this support and assistance.

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An excellent reference work covering everything from the legislative, regulatory and administrative framework to guidelines for employment practices, the manual is available for $75. by contacting EduServ Inc., 1155 West 8th Avenue, Vancouver, British Columbia, V6H 1C5, (604) 736-4266.

CHILD ABUSE — WHAT IS IT?

The Child and Family Services Act defines child abuse in Section 1 as:

> An act or omission by a parent, guardian or a person in whose care a child is which results in:
> (i) physical injury to the child,
> (ii) emotional disability of a permanent nature in the child or is likely to result in such a disability, or
> (iii) sexual exploitation of the child with or without the child's consent.

Causes of child abuse are complex. The pressures of modern society when combined with the reduced influence of many support systems such as religion, extended family relationships and homogeneous social norms are likely to increase the potential for family violence.

Emotional and physical abuse of children, in particular, can often be traced to the severe stresses placed on the family, especially the nuclear family, in today's society. The causes of sexual abuse are more complex and more difficult to identify.

The generally accepted causes of physical and emotional abuse include severe emotional pressures, a family history of violence, and environmental stresses and burdens. Child abuse is most likely to occur when there is an interplay of several negative forces affecting the family.

These forces could be:

1) personal factors (poor health, lack of social and life skills, alcohol or drug abuse, parents' own history of abuse in childhood, inexperience as a parent, marital discord or break-up),
2) attitudes and values (attitudes toward children, women, changing sex roles, violence, corporal punishment, economic and social competition, religion, sexuality, parenting),
3) societal and economic factors (inadequate income, unemployment, debt, business failure, poor housing conditions, lack of community services such as drug and alcohol clinics, child care facilities, mental health clinics, family counselling services).

Because the signs are often visible to the eye, physical abuse is relatively easy to identify. Neither emotional nor sexual abuse is readily detected. It is essential that teachers be sensitive to the signs or signals of all three types of abuse. Children as well must be made aware of their rights to human dignity and bodily inviolability, vis-a-vis such concepts as "good touch-bad touch" and know there is someone to confide in if they have been violated physically, emotionally, or sexually.

CHILDREN IN NEED OF PROTECTION

The words "child abuse" and "child neglect" are used to indicate a child who is in need of protection and consequently in need of community intervention on his or her behalf. The community has a legal, moral and ethical responsibility to assume an active role in response to child abuse and neglect. Most communities in the province have protective systems in place. The Manitoba Child and Family Services Act describes children in need of protection, provides for a comprehensive process of intervention, and makes reporting of child abuse and neglect mandatory.

Under **Section 17** of The Child and Family Services Act, **a child in need of protection** includes a child:

> (a) without adequate care, supervision or control;
> (b) in the care of a person:
> (i) who is unable or unwilling to provide adequate care, supervision or control of the child, or
> (ii) whose conduct endangers or may endanger the life, health, or emotional well-being of the child, or
> (iii) who neglects or refuses to provide or obtain proper medical, surgical or other remedial care or treatment necessary for the health or well-being of the child or refuses to permit such care or treatment to be supplied to the child when it is recommended by a duly qualified medical practitioner;
> (c) **who is abused or is in danger of abuse;**
> (d) who is beyond the control of the person caring for him or her;
> (e) who by his or her behaviour, condition, environment, or association is likely to injure himself, herself or others;
> (f) who refuses or is unable to provide adequately for the health needs of herself or her child;
> (g) who, being under the age of 12 years, has been left unattended and without reasonable provision having been made for his or her supervision and safety; or
> (h) who is the subject of activities in violation of section 63 or section 84.

Section 18 of The Child and Family Services Act states:

> Any person who has information that a child may be in need of protection shall forthwith report the information to the director or an agency and any person who fails to do so commits an offence punishable on summary conviction.

The agency referred to means a Child and Family Services Agency or a regional office of Manitoba Community Services.

INCIDENCE OF CHILD ABUSE

No one knows the full extent of child abuse in Canada. Although the number of cases reported has increased dramatically in the last few years, experts are unanimous in the belief that serious under-reporting still prevails.

The following summary provides a rough statistical picture of child abuse as it relates to the school system.[1] There is no reason to believe that Manitoba differs from other provinces or states throughout North America.

Statistics indicated that one out of every two females and one out of every three males have been victims of sexual offences. (Badgley, 1984).

- In less than a decade the number of reported cases of child sexual abuse in Canadian provinces has increased over 10-fold.
- The common offender is a multiple abuser, pursuing a gradually expanding number of victims, rationalizing his or her actions, being difficult to discover, seldom suffering from a visible illness, and otherwise functioning adequately in society. (Badgley, 1984)
- The American experience would indicate that 83 per cent of the offenders are primary caregivers, the vast majority of which (95 per cent) are parents. (Fead, 1985)
- The vast majority of abuse is physical abuse or neglect, with American statistics showing sexual abuse accounting for 8.5 per cent of the cases. (Fead, 1985)
- Teachers report child abuse more often than any other professional group. (In Manitoba over 60 per cent of all disclosures of child abuse are reported by teachers.)
- Sociologist David Finkelhor states that "Even if no more than 10 per cent of all girls and two per cent of all boys were destined to be sexually abused, it would lead to the prediction (in the U.S.A.) of roughly 210,000 new cases of sexual abuse occurring each year." (In Canada the incidence would be approximately one-tenth that figure or 21,000 new cases each year.)

Recent research in Connecticut indicates that boys may be sexually abused as often as girls; that boys are less likely to report.

Recent research also indicates that the incidence of female abusers may be much higher than previously indicated; that sexual abuse of children by women may often be concealed under the guise of child care; that children are even less likely to report abuse by mothers, stepmothers, older sisters, nannies, or other primary caregivers than abuse by other perpetrators.

The Ontario Teachers' Federation handbook on child abuse for Ontario teachers, **A Childhood for Every Child,** states:

> However imprecise and unsatisfactory the figures, there can be no doubt that we receive abused children into our classrooms every day. No teacher can afford to dismiss the disturbing possibility that one of the children in his or her class is a victim.

In Manitoba almost 90 per cent of children reporting abuse are of school age; four out of 10 are between the ages of 4-10 years; five out of 10 are between the ages of 11-17 years. (**Physically and Sexually Abused Children in Manitoba,** 1985, Manitoba Community Services).

The Ontario handbook for teachers also points out that:

> Abusive acts are committed by very ordinary people. Fewer than 10 per cent of verified abusers can be classified as mentally ill. Abusers may be rich or poor, live in urban, suburban, or rural settings, use alcohol or not, use drugs or not, be single parents or not, claim any religious affiliations.
>
> No neighbourhood and no school is "above" the problem. Teachers, as well as parents or guardians, may be abusers. You are required by law to report abusive teachers too.

According to the Badgley Report:

> Three in five sexually abused children had been threatened or physically coerced by their assailants. Young victims are as likely to be threatened or forced to engage in sexual acts by persons relatively close in age as by older persons.
>
> Few young victims were physically injured; substantially more suffered emotional harm.
>
> A majority of victims and their families do not seek assistance.

The summary of the Badgley Report, **Sexual Offences Against Children in Canada,** states:

> Child sexual abuse is a largely hidden yet pervasive tragedy that has damaged the lives of tens of thousands of Canadian children and youths. For most of them, their needs remain unexpressed and unmet. These silent victims — and there are substantial numbers of them — are often those in greatest need of care and help. Only a few young victims of sexual offences seek assistance from the helping services and there are sharp disparities in the types and adequacy of the services provided for them in different parts of the country.

[1]British Columbia School Trustees Task Force Report on Child Abuse.

RECOGNIZING THE ABUSIVE PARENT

Because the vast majority of child abuse perpetrators are parents or other primary caretakers, it may be helpful for the teacher to be aware of some possible indicators of abusive parents. AGAIN IT IS IMPORTANT TO REMEMBER THAT SUCH LISTS HELP TO DETERMINE WHICH CHILDREN ARE AT RISK. THEY DO NOT PROVE THAT A PARTICULAR CHILD IS AT RISK.

Many parents endure high levels of stress without resorting to child abuse; others who seem to be model parents and citizens may be guilty of child abuse so compulsively bizarre that it can only be described as demonic.

In particular, teachers should not allow their concern about a particular child to be allayed by the position or stature of the parents in the community. Anyone may be guilty of child abuse. Pedophiles — people who have a strong and deeply rooted sexual attraction to children — often deliberately choose careers that will put them in a position of trust with children. Thus the pediatrician, child psychologist, or scout master — as recent court cases have revealed — are more likely to be guilty of sexually abusing children than the neurosurgeon, the car dealer, or the volunteer with the Age and Opportunity Bureau.

Again, while teachers need to be aware that any parent or guardian may be guilty of abuse, it is not the teacher's job to assess the psychological propensities of the parents and guardians of the children in their classroom nor conduct investigations into possible abuse cases.

For convenience, the warning signs of parental characteristics often associated with child abuse are categorized into neglect and physical, sexual abuse. Like the abuse itself, individual abusers can seldom be neatly categorized.

WARNING SIGNS — PARENT OR ADULT PERPETRATORS

Parental Behaviours Characteristic of Neglect

1. Gives child inappropriate food, drink, or drugs.
2. Dresses a child inappropriately for the situation or season.
3. Leaves a small child unattended for extended periods of time; leaves child with unsuitable caretaker; leaves child under age of fourteen alone all night.
4. Seems preoccupied with satisfying own needs; seems detached from and unconcerned about child's needs.
5. Indicates that pregnancy or child was unwanted.
6. Demonstrates inability to cope with demands of parenting; chronic illness, depression, psychosis, transiency, social isolation.

Parental Characteristics Often Associated With Physical Abuse

1. Uses discipline inappropriate to child's age or to the nature of the offence.
2. Is unwilling to discuss child's condition or family situation; suspicious or hostile toward school personnel.
3. Offers illogical, vague and inadequate, or contradictory explanations of child's injuries.
4. Seems unconcerned about the child's injury.
5. Blames the child, or a third party for the injury.
6. Sees the child as "bad" — as the cause of all life's problems.
7. Is often angry, impatient, out of, or almost out of control.
8. May misuse alcohol or drugs.
9. Complains that the child is a burden; feels very alone in carrying out responsibility.
10. Has unrealistic expectations of child; poor understanding of normal child development.

Parental Characteristics Often Associated With Emotional Neglect

1. Blames or belittles child, in public and at home.
2. Over-praises or "fusses" over child in public; cold and distant in private.
3. Is extremely permissive or overindulgent; fails to set limits.
4. Withholds comforting when child is really frightened or distressed.
5. Treats other children in the family differently and better; more accepting, more loving, less critical, more "giving."
6. Tends to describe child in repeatedly negative ways: stupid, bad, stubborn, a troublemaker, and predicts failure for the child — child will never amount to anything, will end up in prison; talks this way within the child's hearing.
7. Assumes child is at fault, without waiting to learn facts; blames child anyway.
8. Holds child responsible for own life difficulties and disappointments.
9. Identifies child with disliked or hated relative: "you're just like . . ."
10. Forces child to live up to some predetermined and inappropriate standard; unable to accept or value child as a unique individual.

Parental Characteristics Often Associated With Sexual Abuse

1. Is often dominant in the home, but submissive in outside interpersonal contacts.
2. May have rigid moralistic standards and be unusually vulnerable to criticism or to lack of interest or abandonment by the spouse or other important person — to anything that lowers their already inadequate self-esteem.

3. Appears unusually protective, possessive, or jealous of the child; isolates the child from contact with other children and adults.
4. Clings to child, both physically and emotionally; appears to "woo" the child when together as though child were potential or actual lover; may see relationship with child as very special and secret.
5. Blames others for life difficulties, disappointments, and for inappropriate sexual behaviour with child; may accuse child of being seductive, of wanting or enjoying the sexual activity.
6. Is often compulsive in behaviour — excessively neat, clean, rigid.
7. Encourages or condones inappropriate sexual behaviour by the child; i.e. forcing the child to kiss or be fondled by others, taking pornographic pictures of the child, displaying pornographic pictures to the child, talking "dirty."
8. Is not the child's biological parent.

Possible Characteristics of the Non-Offending Parents in Sexual Abuse Situations

1. May be absent from home for reasons such as employment or illness, leaving the child alone with the offender and creating a greater opportunity for sexual abuse.
2. May play a passive or subordinate parenting role; may themselves be the victims of physical, sexual, or psychological abuse within the marriage and/or as a child.
3. May be insensitive to or unaware of normal sexual development in children and therefore fail to recognize signs of sexual abuse.

RECOGNIZING CHILD ABUSE

The first step a teacher must take toward acting on behalf of an abused child is to admit the possibility of the abuse. This may be a very big step. If the teacher's first suspicions are not clear enough to warrant an immediate report, he or she will need to take a second step. The second step is to observe closely the child's appearance and pattern of behaviour over time in order to clarify the original grounds for suspecting abuse.

On the following pages are lists of warning signs of abuse. Teachers must bear in mind that such lists are at best a means of sensitizing an observing teacher. Indicators are clues, not proof. A child who exhibits a number of signs of abuse may not in fact be an abused child; a child who exhibits no signs of abuse may be the victim of serious, long-term abuse. THE LAW DOES NOT REQUIRE TEACHERS TO PRESENT PROOF OF ABUSE. ALL IT REQUIRES IS WELL-FOUNDED SUSPICION.

Indicators are especially telling if they are:

- repeated and/or consistent over time
- long-lasting
- pervasive

The indicators are usually listed in four separate but overlapping categories of abuse:

1) Neglect; acts of omission;
2) Physical abuse, sometimes called battering;
3) Emotional abuse, sometimes defined as the destruction of a child's self-confidence;
4) Sexual abuse and molestation, including incest.

Such categorization of abuse and neglect is of necessity an oversimplification. Teachers must not leap to the conclusion that every bruise or every instance of a child falling asleep in class is indicative of child abuse. On the other hand, it is important not to dismiss signs of abuse nor to discount children's stories of mistreatment. Children, especially younger children, almost never lie about abuse.

An abused child often experiences abuse in more than one category. Sexual abuse often accompanies emotional abuse; neglect often accompanies physical abuse.

NEGLECT

Neglect is more often a matter of omission than commission. Neglect occurs when a primary caregiver endangers a child's welfare by failing to provide for physical, emotional, or medical needs.

Neglect is harder to pinpoint and more often ignored than physical abuse. The warning signs are less dramatic and the effects on the child appear to be less damaging. Further, it is easy to excuse neglectful parents or guardians as depressed or ignorant.

In fact, neglected children are very seriously at risk. Often in chronic and long-term situations, neglected children may experience such severe physical debilitation that every facet of the maturation process is jeopardized.

Teachers often find it difficult to make clear-cut judgments about neglect. Neglected children seldom reach out for help. For them, neglect is normal. They make no disclosures, and may be genuinely puzzled by a teacher's concern for their welfare.

WARNING SIGNS OF NEGLECT

1. Failure to thrive — signs of physical or developmental delay; a silent watcher.
2. Unattended health problems; poor hygiene; dirtiness.
3. Consistent fatigue, listlessness; falling asleep in class.
4. Consistent hunger; underweight; begging, stealing food; theft in general.
5. Inappropriate dress; symptoms of exposure; e.g. sunburn, frostbite.
6. Inadequate supervision; child left in the care of another child too young to provide protection; abandonment.
7. Frequent unexplained absences from school; parental disregard for school performance.
8. Assuming the parent role at home; worrying about parents or younger siblings.
9. Verbal evidence that there is no caregiver at home; arriving early, staying late at school.

PHYSICAL ABUSE

Physical abuse is any non-accidental injury of a child which exceeds that which could be considered reasonable discipline. Unexplained bruises and welts are the most common indicators of physical abuse. In assessing a suspicious case, the location of bruises is significant. Bruises on the knees, shins, elbows, arms and forehead are more than likely the result of ordinary play. Bruises on the back, buttocks, backs of legs, genital area and face are less likely to be accidental.

SIGNS OF PHYSICAL ABUSE

1. Physical injuries that are unexplained or inconsistent with explanation; bruises, welts, human bite marks, burns, fractures.
2. Delay in seeking medical attention; injuries in varying stages of healing.
3. Inappropriate dress, especially long-sleeved clothing in hot weather; refusal to remove clothes for gym class.
4. Fear of going home; lack of attachment to one or both parents.
5. Denies or minimizes injuries and bruises.
6. Behaves in a way that provokes punishment; feels deserving of punishment.
7. Exhibits extremes of behavior: extremely aggressive or withdrawn, fearful or reckless, attention seeking or attention avoiding, tearful or tearless.
8. Doesn't seek comfort when hurt; doesn't react during frightening activities; a silent or frozen watchfulness.
9. Hyper-alert to danger or overly trusting of strangers; wary of physical contact with adults.

EMOTIONAL ABUSE

The Child Protection Centre of the Winnipeg Children's Hospital defines emotional abuse as "the damaging, by whatever means, of a child's self-image by an adult responsible for the child's nurturing or learning, resulting in a decrease in the child's feeling of personal worth, and thus in his ability to love, to trust and to feel at one with the human race."

Children who are physically and/or sexually abused are emotionally traumatized. It is important to remember, however, that there are large numbers of children in our society who are never touched physically or sexually but who are "put down" every day; children who are told they are dumb, stupid, ugly, lazy; children who are blamed for everything, who never measure up no matter how hard they try. As Erik H. Erikson has written "some day, maybe there will exist a well-considered and yet fervent public conviction that the most deadly of all possible sins is the mutilation of a child's spirit."

WARNING SIGNS OF EMOTIONAL ABUSE

1. Appears overly compliant, passive, undemanding, shy; unusual need to please adults.
2. Shows episodes of very aggressive, demanding, and angry behaviour.
3. Shows behaviour which is inappropriate to age, such as "little adult" (parents other children), "little baby" (sucking thumb, wetting beyond usual age, biting, rocking).
4. Suffers from speech disorders; sleep disorders; inhibition of play.
5. Fears failure, has difficulty concentrating, sets overly high standards, gives up and won't try again.
6. Appears emotionally hungry, yet has poor peer relationships.
7. Constantly apologizes, even when not at fault.
8. Is self-deprecating, or makes claims of competence and achievement based on fantasy and daydreams.
9. Severe depression; attempted suicide.

Teachers are often best able to identify emotionally abused children since they are often witness to the behavioural consequences. "Disturbed" children are usually disturbed for a reason. One of the recurring reasons is abuse.

SEXUAL ABUSE

Sexual abuse is the use of a child for sexual purposes by an adult, or the allowing of such use of a child by a parent, caretaker, or legal guardian. It includes any manual, oral or genital sexual contact or the use of an object for sexual touching or penetration or any other explicitly sexual behaviour that an adult imposes on a child by exploiting the child's vulnerability and powerlessness. Child pornography and child prostitution are forms of sexual abuse.

Because most sexual abuse of children is often non-violent and occurs in the child's own home with persons known to the child, it often goes undetected. Since even very young children sense that sexual abuse of children is shrouded in secrecy and shame, they seldom disclose sexual abuse directly. The teacher needs to listen carefully to such remarks for the deeper truth they may contain.

Teachers also need to be aware that most sexual abuse of children may not leave physical signs. Sexual abuse may include such activities as rubbing the child's genital or anal area, engaging the child in oral sex, masturbation, sexual activity with animals, making or viewing pornographic pictures, urinating or defecating upon the child.

Recently children in Canada and the U.S.A. have told of ritualistic torture, sexual molestation, and sexual murders. As bizarre as such stories are, it is difficult to imagine that small children could invent such stories or, having been exposed to them through the media, risk adult anger and retribution by falsely accusing parents or teachers.

In fact children seldom lie about sexual abuse. However, they often "recant" allegations of abuse — a not surprising fact when one considers the imbalance of power between the offending adult and the child.

In the world of the child, adults control all of the resources and they know all the answers. If the offending adult threatens the child or someone the child loves, the child does not question the power of the adult to carry out the threat. If the adult informs the child that the sexual abuse is normal, desirable, or the fault of the child, the child may fail to understand what is happening or may fear that he or she will be blamed for being bad, sexually provocative, or different.

Even if a child has the courage to disclose, being "apprehended" and placed in the care of strangers, isolated from family and friends, subjected to medical examinations and repeated questioning, and buffeted by concerns and fears about "offending" and "non-offending" family members, may convince him or her that child protection is not as simple as the school programs suggested.

Especially in cases of incest, enforced secrecy and the child's fear of destroying or disrupting the privacy and security of the family are such powerful deterrents to disclosure that children often do not disclose sexual abuse until they are adults. Many never tell even then.

Thus sexual abuse, especially incest, which is not an act of sexual frustration but an act of sexual compulsivity, often continues from one generation to the next. Incest always involves denial; the family system is closed. Treatment may be difficult because of the refusal of the perpretrator to accept responsibility for the incest and the tendency of the victim to minimize the incest and protect the offender.

Some of the coping strategies commonly used to survive serious sexual abuse, particularly incest — blocking, repression, dissociation — militate against recognizing or confronting the reality of the abuse even as adults. For example, almost 90% of individuals diagnosed as multiple personalities were sexually abused as children. As children such individuals often distance themselves from the pain and isolation of their abuse through imaginary companions or by talking about the abuse in an unemotional, matter-of-fact manner — as though it happened to someone else. As adults they develop a number of discrete personalities, the good girl, the bad girl, the victim, the victimizer — all of whom may deny or block the sexual abuse which lies at the heart of their inability to integrate their personalities.

From Victims to Survivors: New Options for Women Sexually Abused as Children, a 1987 publication sponsored by the Canadian Congress on Learning Opportunities for Women, outlines some of the physical problems that adults experience as a result of sexual abuse as children: anxiety, insomnia, depression, migraine headaches, back problems, asthma, eating and digestive problems such as cramps, pain or diarrhea under stress, ulcers, overeating, anorexia, drug and alcohol abuse. According to the CCLOW publication, 85% of adult women heroin addicts were sexually abused during childhood.

Children of both sexes and of all ages are vulnerable to sexual abuse. Children who are isolated from others, with few friends and little contact with brothers and sisters, are more often sexually abused. Some abusers are able to take advantage of a child's isolation; others manage to isolate a child; some children may isolate themselves because they feel different and fear stigmatization.

Girls with older brothers, step-fathers or common-law fathers are particularly at risk. Disabled children are also very much at risk, possibly because they are more isolated and less likely to be able to defend themselves.

Perpetrators of child sexual abuse often defend their actions by citing consent or seduction by the child. In fact, neither legally or morally can a child consent to sexual activity with an individual significantly older than the child. As David Finkelhor, author of **Child Sexual Abuse, New Theory and Research,** explains: "Adult-child sex is wrong because the fundamental conditions of consent (a balance of power) cannot prevail in the relationship between an adult and a child . . . like a prisoner, the child is truly not free to say no." Moreover, a child is never capable of giving informed consent since the child cannot understand or predict the consequences of adult-child sexual contact.

When they become adults, both male and female victims of abuse are likely to become abusers, re-enacting the abuse they experienced as children with their own or other children. Female abuse victims, in particular, often continue the pattern of victimization throughout their lives and are raped, battered, and beaten more often than other women. As mothers they are more likely than other women either to over-protect their children or to fail to protect them from sexual abuse.

Sexual abuse leaves deep scars, but victims of sexual abuse can be helped. The first step consists of breaking the silence. A sensitive, well-informed teacher can help the child victim with that.

SIGNS OF SEXUAL ABUSE

1. Torn, stained, or bloody clothing.
2. Pregnancy; sexually transmitted disease.
3. Complaints of pain, swelling or itching in the genital or anal area or throat; difficulty going to the bathroom or swallowing.
4. Reports of anal fissures, urinary or vaginal infections; perineal bleeding or discomfort.
5. Persistent headaches; recurrent abdominal pain; asthma attacks;
6. Speech disorders; sleep and eating disorders; nightmares;
7. Defective bowel or bladder control; bedwetting; regressive behaviour.
8. Disclosure of abuse by child or by other children.
9. Seductive-sexualized behaviour with adults or peers; sexual exploration with animals.
10. Excessive masturbation; preoccupation with sexual matters — language, art, fantasy, play; overly sophisticated or bizarre sexual knowledge or behaviour.
11. Unwillingness or refusal to undress for physical education.
12. Unusual fear of men, a particular person, or a particular place.
13. Excessive fantasizing; inability to concentrate; decreased school performance, withdrawal from usual activities.
14. Compulsive behaviour, especially compulsive cleanliness. detachment, lack of affect.
15. Extreme cruelty to animals or to younger children.
16. Alcohol or drug abuse.
17. Prostitution.
18. Depression, self-mutilation and suicide attempts.

HANDLING DISCLOSURE

Many victims of child abuse indicate that they disclosed or attempted to disclose their abuse to teachers or other adults on a number of occasions before they were heard or else gave up trying to be heard. Yet the teachers involved were genuinely convinced that they were open to disclosure but no disclosure was made.

There are basically three reasons for the discrepancy between what the child feels he or she has said and what the teacher hears: (1) the deliberate "couching" of the disclosure in disguised or very general terms; (2) the inability of the child to explain the abuse in language the teacher understands; and (3) a child's belief that adults can "read their mind" and therefore must know what is happening to the child.

Children generally are careful not to reveal more than they feel their teachers are capable of handling. Thus their initial attempts at disclosure are often little more than hints. For example, the child may say, "I don't like Frank and I refuse to call him daddy." or "I have a friend whose mommy is always yelling at her." Such messages are more likely to occur when the abuse is fairly recent or due to the introduction of a new person into the family circle such as a stepparent or visitor.

Many children who feel they have disclosed abuse have used language that the teacher simply does not understand. Many families describe body parts in terms that are unique to a particular family or culture.

Perhaps the most important reason that teachers miss disclosure of abuse is that in fact the actual incident may not have been disclosed at all. Many children who are subjected to sexual abuse feel that they have been visibly marked by what has happened to them. Children who feel stigmatized by abuse may reveal it by withdrawing from classroom activities or refusing to look the teacher in the eye, but they do not articulate the abuse in words. Thus even a sensitive and observant teacher may miss what the child is trying to share.

Some disclosures, however, especially those that follow programs on personal safety, may be quite explicit and inappropriate for the moment. In such cases the teacher needs to acknowledge the disclosure, but indicate that it is something that the two of them will want to discuss more fully in private at a later time.

However the disclosure is made, it is important that the teacher respond to it in a reassuring manner that conveys three important messages:

(1) You are not to blame.
(2) You are not alone.
(3) You will be helped.

These three messages should be conveyed to the child quietly and succinctly as soon after the disclosure as possible.

In many cases it will not be necessary for the teacher who suspects and reports abuse to interview the child further. However, in some cases an interview by the teacher may be necessary to examine more fully a set of suspicious circumstances or injuries. In such cases, the following do's and don'ts of interviewing the child may be helpful:

Do's

- make sure the interviewer is someone the child trusts
- conduct the interview in private, alone with the child
- conduct the interview informally, in an informal but safe setting
- be reassuring in every way
- use clear and gentle language
- ask the child to tell you only as much as she or he wants to; probe gently and slowly
- praise him or her for his or her courage in confiding in you
- inform the child if anything further is to be done and when
- check in with the child later so that she or he does not feel isolated or abandoned after a "confession," however slight it may seem to you

Don'ts

- don't be judgmental or disparaging of child or parents
- don't suggest interpretations or solutions
- don't display shock or horror
- don't insist that the child remove clothing
- don't display injuries to other staff
- don't leave the child alone with a stranger

Victims of child abuse have been violated. It is important that their disclosure not subject them to further intrusions by unnecessary prying or probing however well-intended. If the child refuses to provide additional information about the abuse despite a gentle, reflective approach that focuses on the child's feelings, the teacher must not persist.

The child needs to be reassured that the teacher believes him or her, is concerned for his or her welfare, and will be available to talk with the child at some future time. If a child discloses abuse, the teacher must report it even if at some later time the child may attempt to "take back" what was said during the initial disclosure.

THE ROLE OF THE TEACHER

Teachers have an important role to play in both intervention and prevention of child abuse. Their legal obligation to report suspected or alleged abuse to a Child and Family Services Agency and/or the local police detachment is spelled out in Section 18 of the Child and Family Services Act:

Reporting a child in need of protection

18(1) Any person who has information that a child may be in need of protection shall forthwith report the information to the director of any agency and any person who fails to do so commits an offence punishable on summary conviction.

Duty to report.

18(2) Notwithstanding the provisions of any other Act, subsection (1) applies even where the person has acquired the information through the discharge of professional duties or within a confidential relationship, but nothing in this subsection abrogates any privilege that may exist because of the relationship between a solicitor and the solicitor's client.

Further consequences of non-reporting.

18(3) Where there are reasonable grounds to believe that any person who in the course of professional or official duties had reason to suspect that a child may be in need of protection and failed to comply with subsection (1), the director may report the matter to any professional society, association or other organization authorized under the laws of the province to regulate the professional activities of the person, and that professional society, association or organization shall cause an investigation to be made into the matter.

Protection of informant.

18(4) No action lies against a person for providing information in good faith and in compliance with subsection (1).

Identity not revealed.

18(5) Any person who reveals to the family of the child except in the course of judicial proceedings the identity of a person who has given information under subsection (1) without that person's written consent commits an offence punishable on summary conviction.

Interference and harassment is an offence.

18(6) Any person who interferes with or harasses any person as a result of that person providing information in compliance with subsection (1) commits an offence punishable on summary conviction.

However, the role of the teacher goes far beyond the legal requirement to report. Because the classroom teacher sees a child on a regular basis, he or she is often in the best position to identify abused children.

Most abused children are of school age. Half or more of their waking hours may be spent in the company of teachers, who have a unique opportunity to observe children over time. In turn, the abused child, who is often distrustful of all adults, has an opportunity to assess the teacher's responsiveness and sensitivity before turning to her or him for help. For many children a teacher may be the only potential refuge in a frightening, hostile, unresponsive world.

Abuse is a seriously handicapping condition. One American study found that 27% of children judged to be abused or neglected were subsequently enrolled in special education classes. Teachers have a range of skills that are useful in helping a child cope with the social, psychological, and learning difficulties caused by abuse.

The abused child is a child at risk. Research suggests that abusive adults are often on an escalating course of uncontrolled behaviour. Each year young, vulnerable children die at the hands of their own parents and guardians. Some of these deaths might be prevented through the timely intervention of a concerned teacher.

Laws, information, inservices, school board policy should make clear the teacher's responsibility to the abused child. But how the teacher handles instances of child abuse is often based on the teacher's feelings about child abuse and his and her confidence, or lack of confidence, in the ability of "the system" to assist the abused child.

Disbelief, denial, anger, revulsion, fear, and anxiety — such feelings may prevent a teacher from "seeing" the abused child in the classroom or else from responding calmly and professionally. Distrust of the child protection system may cause a teacher to decide that reporting the abuse is not in the child's best interest. Certainly the reincidence rate and the numbers of children who "recant" their allegations of sexual abuse highlight the danger that intervention will increase the child's miseries by introducing new disruptions into his or her life, or even by inciting the parent or guardian to greater abusiveness.

Teachers should be prepared to confront and work through their feelings about child abuse and to work within the system to improve all protection services for children.

If teachers are to fulfil their responsibility to abused children, they must be assured of the support of senior administration, principals, and other teachers. Only then will they be confident enough to draw upon the expertise and experience with children that make it possible for them to play a pivotal role in the intervention and prevention of child abuse.

The extent to which teachers already understand and accept their responsibility to children is reflected in the fact that approximately 80% of all reports of child abuse are made by teachers. Even in small communities where the guarantees of confidentiality and protection of informants outlined in the law are essentially illusionary, teachers show their commitment to children by reporting instances of suspected child abuse.

Teachers also demonstrate their commitment to children through community programs, through classroom instruction on abuse prevention, and through advocacy for better services for abused children within the school and the community.

THE ROLE OF THE SCHOOL SYSTEM

School systems throughout Manitoba are already playing an important role through their support of such personal safety programs as "Feeling Yes, Feeling No"; inservice training using the CARE PACKAGE; and regional and local child abuse workshops.

In Winnipeg, the Seven Oaks School Division, for example, is currently in its fifth year in the development and provision of a personal safety program for its students. The primary purpose of their program is "to inform and educate children about what they can do to protect themselves against sexual abuse." The division's involvement is based on the beliefs that:

(a) schools share with society a responsibility to combat a serious social problem, that of child sexual abuse; and provide a safe environment in which children can deal with the issue in a positive, comprehensive manner; and

(b) children can learn self-protective skills that reduce their vulnerability to assault; and can be provided with strategies for dealing with assault in such a way as not to place themselves in greater/further jeopardy.

An evaluation of the program indicates that it has (1) been well-received by children, teachers, and parents; (2) raised the general awareness and sensitivity of the community and the school to a serious social problem; (3) enhanced the self-concepts of both students and teachers involved in the program; (4) increased teachers' sensitivity to children's needs and the community's "helping" resources: (5) resulted in students avoiding potentially dangerous situations; and (6) improved the image of Seven Oaks School Division as a "caring" school division, whose teachers are responsive, responsible professionals.

The Seven Oaks Program has included: (1) intensive training for five teachers, who then provided, (2) two days of inservice on sexual abuse for all elementary teachers, and (3) training for all elementary teachers and counsellors on the use of the materials. An integral part of the program has been communication with administrators, parents, and community and child-care organizations and participation by parents and child-care agencies. (Additional information about the Seven Oaks program is available from its coordinator, Marilyn Froment, Seven Oaks School Division, 375 Jefferson Avenue, Winnipeg, Manitoba R2V 0N4.)

In Manitoba, schools have an important role to play in educating future parents about conditions leading to child abuse. The emphasis in family life courses should be on parenting models, parent-child relationships, nutrition, child development, discipline, and emotional and psychological demands of parenting.

Included in the kit of materials on child abuse is a copy of a model policy developed and distributed by Manitoba Education to school divisions to assist in policy development. Most school divisions and districts already have policies on child abuse. Such policies need to be reviewed periodically to ensure that they meet the needs of the local communities.

The provincial organizations — **the Manitoba Teachers' Society, the Manitoba Association of School Superintendents, the Manitoba Association of School Trustees, and Manitoba Education** — have cooperated in the development of this Teachers' Protocol and are willing to assist in the development and implementation of policies and programs to prevent child abuse.

The whole school system has a vital role to play in effective intervention after child abuse has been reported. But schools have a much larger and more important role to play in the prevention of child abuse. Only through the development of long-term prevention strategies and cooperative prevention programs can the schools discharge the responsibilities they have to the children they serve.

GUIDELINES FOR ACTION

1. Team Approach

A teacher who suspects child abuse must make a report to the appropriate authorities. The teacher should also inform and involve, as soon as possible, the principal and possibly the school counsellor.

Most school divisions have policy which clearly outlines the steps a teacher should take in fulfilling her responsibility to a child in need of protection. Every teacher should be familiar with divisional policy. It is important to remember, however, that the person who suspects child abuse is responsible to report it. The teacher should make such a report to a local child and family services agency, the police, or a medical child abuse unit (such as Children's Hospital Child Protection Centre).

Sometimes when a team approach — principal, counsellor, teacher and possibly a public health nurse — is being used, one member of the team may be designated as school contact, acting as an agent of the teacher who suspects abuse, to report to the Child and Family Services Agency on the teacher's behalf.

However, the teacher remains responsible under the law if that agent does not report and the child suffers further injury as a result of failure to report. Thus, the teacher should receive oral or written confirmation that the information has been reported. If reporting is not done by the agent, and the teacher remains convinced that there is a reasonable basis for the suspicions, he or she must report directly to the Child and Family Services Agency.

As noted earlier, section 18(4) of The Child and Family Services Act provides legal protection to any person who, in good faith, reports information about child abuse to Child and Family Services.

2. Time is of the Essence

It is essential that the report of suspected or alleged child abuse be made immediately, preferably on the same day that the teacher suspects the child abuse. If it is impossible to consult with others on the same day, the teacher should report his or her suspicions that day and discuss the matter with team members later.

3. Procedures Respecting Disclosure of Abuse

The teacher's responsibility is to report all instances of suspected child abuse. Responsibility to investigate allegations of child abuse and to determine what action shall be taken pursuant to the disclosure lies with Child and Family Services and/or the police. Generally teachers will not be called upon to interview parents or to relay any information to them. If an interview with a parent suspected of abuse becomes necessary, the teacher should consult with his or her principal and possibly with a social worker from Child and Family Services before the interview takes place.

4. Confidentiality

In order to protect the rights of the child and the alleged perpetrator as well as the interests of the reporting teacher, strict confidentiality must be maintained when dealing with instances of alleged child abuse. Maintenance of the highest professional standards of confidentiality will also help preserve the teacher-pupil-parent relationship essential for successful learning to take place.

Child and Family Services Agencies in Manitoba are obliged to investigate every report of alleged child abuse even if it comes from a person who chooses to remain anonymous. The school, however, has a special role to play in protecting the rights of children. For that reason, teachers and other school officials should identify themselves and their school when reporting instances of child abuse. By so doing, the school sends a powerful message to the community about its concern for and commitment to children.

5. School Board Policy

School board policy may direct the teacher to report to the principal, counsellor, nurse, clinician and/or the superintendent in addition to the child protection agency. Such a report should follow the guidelines laid out in school board policy. Even when such a report is not required, the teacher may find it useful to document for future reference the specific reasons for suspecting child abuse.

6. Follow-up Procedures/ Further School Responsibility

For the sake of the child involved it is important that the designated school contact follow up with the Child and Family Services Agency to determine what the school can do to support the child during and after investigation of the alleged abuse. The Agency itself is often handicapped in its efforts to support the child and the family by the pain and resentment caused by its role as intervenor. Its only hope of doing an adequate job is with the cooperative commitment of all professionals who have knowledge of and the skills to help a particular child.

Because abused children often have special needs, their teachers may be expected to assist in a treatment program that will take place over a period of many months. In such cases, it is important that the teacher be able to draw on the resources of specially trained social workers and clinicians in order to meet the needs of a specific child. In other cases, the teacher's commitment need not extend beyond providing a safe environment for the child during the period of greatest trauma.

It is important to remember that the commitment of teachers goes beyond the individual teacher and child to the broader problem of community commitment to abused children — the political question of resources and policy at the local and provincial levels. In many places, teachers have been among the leaders in pressing for expanded programs.

7. Dealing with Parent(s)/Guardian(s) After Reporting

Parent(s)/guardian(s) who have been investigated for child abuse sometimes find it easier to blame the school and especially the reporting teacher rather than confront their own role in the situation. Teachers who are approached by parent(s)/guardian(s) regarding the investigations of child abuse, should refer the parent/guardian to the Child and Family Services Agency or the police. As noted earlier, teachers (and others) who provide information in good faith are protected under the law from reprisal.

8. Teachers as Witnesses in Court Proceedings

In some cases teachers who report suspected cases of child abuse may be required to testify in court. The rules of evidence are complex. Teachers who feel they may become involved in any court action should contact a staff officer of the Manitoba Teachers' Society for advice and assistance. Because cases often come to court long after the incident/report occurred, clearly documenting information at the time of reporting will make organizing and presenting evidence at a later date much easier.

WHAT HAPPENS AFTER A REPORT OF SUSPECTED CHILD ABUSE

After receiving a report of suspected child abuse, Child and Family Services takes the following steps:

1. The Child and Family Services Agency will investigate and verify or confirm the report in strict confidence and institute required action under The Child and Family Services Act;
2. Depending on each case, the Agency may:
   (a) apprehend the child;
   (b) leave the child with parent(s)/guardian(s) under voluntarily-agreed-upon conditions;
   (c) apply to the court for temporary or permanent guardianship of the child;
   (d) engage parent(s)/guardian(s) in treating their personal difficulties so as to improve the child-rearing conditions of the family;
   (e) alert law enforcement agencies as to the criminal aspects of the case where warranted (i.e., a clear case of child abuse).
3. The Agency will report a case to the Provincial Abuse Registry in the event of a criminal court conviction or a family court decision that a child is in need of protection because of abuse.
4. The Child and Family Services Agency should provide, wherever possible and appropriate, follow-up to the school. If no follow-up occurs, the teacher should initiate contact with the Agency.

THE CHILD ABUSE REGISTRY

The registry provides a central record, accessible primarily to agency workers who need to know if a child has previously been abused and whether an adult has been listed in the registry as an abuser.

The registry can now help agencies ensure that potential employees have no previous history of abuse, and that persons working in a position of trust with children, such as foster parents, teachers, adoptive parents and day care workers, are not listed as abusers.

While the registry exists to ensure the protection of children, it recognizes the importance of ensuring that persons who may be listed as abusers are guaranteed protection of their rights as well. Procedures for the new registry, which went into effect September 1, 1987, are intended to provide this protection.

When the agency's child abuse committee has reviewed the case and finds that the child was abused, but no court action has taken place, the name of the abuser will be given to the Director of Child and Family Services, but it will not be placed immediately in the registry. The accused person will be notified that his or her name will be placed in this registry — and the reasons why — unless the person files an objection with the Director within 60 days.

ACCESS TO THE INFORMATION IN THE REGISTRY

1. A school division, day care centre or other employer whose employees will be responsible for the care of children may also apply to the Director to learn if the name of a prospective employee is in the registry. In such matters, the Director will release only the fact that the name is listed, and no other details.
2. Any person may ask if there is information about himself/herself in the registry. Only information pertaining to the person listed will be released by the Director.

APPENDIX A

MANITOBA GUIDELINES ON IDENTIFYING AND REPORTING CHILD ABUSE

Child abuse is a serious, growing and often self-perpetuating problem, which knows no social barriers. Violence in the family is often physically and always emotionally devastating, not only to the child but to the entire family.

Its identification, treatment and prevention require the close collaboration of child caring agencies, law enforcement units, health care workers, educators, and all whose concerns, whether professional or non-professional, touch upon and affect the lives of children.

Expressing a strong commitment to assist in the provision of a speedy, effective and broad range of services to children and families at risk, the ministers of Community Services, Health, Education and the Attorney General jointly issue these Guidelines on Child Abuse. Their purpose is to provide a procedural and legal framework for the investigation, detection and management of child abuse cases to the growing community of professionals and lay persons providing services to children and their families.

Definitions:

The following definitions apply for the purpose of these guidelines, which are primarily intended for child abuse within the family:

1. "Abuse" means an act or omission by the parent, guardian or person in whose care a child is which results in:
   i) physical injury to the child,
   ii) emotional disability of a permanent nature in the child or is likely to result in such a disability, or
   iii) sexual exploitation of the child with or without the child's consent.
2. "Physical abuse" means an act or omission by the parent, guardian or person in whose care a child is, which act or omission results in harm to the child. It includes, but is not necessarily restricted to: physical beating and failure to provide reasonable protection for the child from physical harm.
3. "Sexual abuse" means any exploitation of a child, whether consensual or not, for the sexual gratification of a parent or person in whose care a child is and includes, but is not necessarily restricted to: sexual molestation; sexual assault; and the exploitation of the child for purposes of pornography or prostitution.

   Sexual abuse includes "incest." Incest is a crime under the Criminal Code of Canada. Therefore, the involvement and participation of the local police force is essential in all child sexual abuse investigations.

   Sexual activity between children may constitute sexual abuse if the differences in ages between the children are so significant that the older is clearly taking sexual advantage of the younger.
4. "Emotional abuse" means acts or omissions on the part of the parent or the person in whose care a child is, which acts or omissions include but are not restricted to:
   a) any unwillingness or inability to provide appropriate care, control, affection or stimulation for a child;
   b) making inappropriate demands upon a child;
   c) exposing a child to frequent family violence tending to produce permanent or long-term emotional disability, including:
      i) non-organic failure to thrive;
      ii) developmental retardation;
      iii) serious anxiety, depression or withdrawal;
      iv) serious behavioral disturbances.

   Emotional abuse remains a major concern but does not require police intervention. Nevertheless, a multidisciplinary team approach may be essential in certain emotional abuse cases.
5. "A person in whose care a child is" means a person in a position of trust who is responsible for a child's welfare and includes a person within the context of a family relationship or foster parent.
6. "Third party assault" means abuse that occurs outside the family and technically does not fall within the guidelines but, nevertheless, is subject to:
   a) police investigation;
   b) referral to an appropriate agency for service;
   c) reporting of the incident to the central abuse registry.
7. "Child" means a person under the age of majority. (In Manitoba the age of majority is 18).
8. "Agency" means:
   i) a child and family services agency incorporated under the Child and Family Services Act,
   ii) a regional office of the department of Community Services; and
   iii) a corporation created pursuant to an agreement under subsection 6(14) of the Act (a Native child and family services agency).
9. "Medical child abuse unit" means professionals within a hospital setting who are specifically responsible for handling suspected or alleged child abuse cases.

   It is expected that the management of child abuse cases within a hospital setting will be from an interdisciplinary perspective and that a hospital child abuse team will therefore be a member of the regional or community team/committee which includes the local child and family services agency, law enforcement and medical/health personnel.

Guidelines:

1. Any person suspecting child abuse shall report it immediately to a child and family services agency, the police or a medical child abuse unit.
2. (a) Where a report of suspected or alleged child abuse is received by a child and family services agency, the agency will consult immediately with the local police force;
   (b) Where a report of suspected or alleged child abuse is received by the local police force, the police will consult immediately with the appropriate child and family services agency;
   (c) Where a report of suspected or alleged child abuse is received by a hospital or other medical health centre with a recognized medical child abuse unit, the hospital/centre will report the incident to the appropriate child and family services agency and local police force immediately, and;
   (d) Where a report of suspected or alleged child abuse is received by a hospital or medical health centre without a recognized medical child abuse unit, the hospital/centre will immediately report the incident to the appropriate child and family services agency, the local police force or the nearest recognized medical child abuse centre.
3. To ensure that the best course of action is taken in every case, there shall be a mutual sharing of all relevant information by the agencies and professionals involved in the investigation and treatment process.
4. The protection of the child is the responsibility of all persons involved. The child and family services agency, however, has the mandate to protect the child as provided for in the **Child and Family Services Act** (Manitoba), with guidance from the professional team members where a recognized medical child abuse unit exists.
5. Every child and family services agency which receives information about the suspected or alleged abuse of a child, including a child in the care of the agency, shall report the information to the Director of Child and Family Services, as required by the **Child and Family Services Act** (Manitoba) in the manner and form set out in the regulations.

In addition to the mandatory requirement for any agency to report, the **Child and Family Services Act** (Manitoba) states any person, including a professional, who has information that a child may be in need of protection, shall report immediately to the Director or an agency and that failure to do so may be subject to legal and/or professional action.

6. The office of the Director of Child and Family Services shall issue statistical and descriptive data, as extracted from agency reports of suspected or alleged child abuse. A regular review of all abused children reported to the Director shall be required in the manner and form set out by the Director. This will ensure the sound disposition of each case, the continuity of service and, ultimately, the safety of all abused children or children at risk in the province.
7. Each child and family services agency should inform the reporter of suspected or alleged abuse of action taken on the report at the earliest appropriate time.
8. In all cases of physical or sexual abuse, the Crown Attorney shall determine whether to lay charges upon completion of the preliminary investigation by the child abuse team.

   In circumstances where the seriousness and urgency of the case dictates, charges will be laid without prior consultation. It is expected, however, that subsequently there will be ongoing consultation from the initial reporting to the final disposition.

It is our hope that this multidisciplinary team approach will ensure that the needs of abused children are met, that their rights are protected and that, wherever possible, families can be kept together with the continued support of all involved.

Original dated at the City of Winnipeg, in the Province of Manitoba, on the 13th day of April, 1984.

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Minister of Community Services

Attorney General

Minister of Health

Minister of Education